PRECURSOR CHEMICAL LABORATORY APPARATUS

REPORT OF THEFT, LOSS, OR SUSPICIOUS ORDER OF PRECURSOR CHEMICAL/LABORATORY APPARATUS

Complete this form in compliance with the Texas Health and Safety Code, Chapter 481.077 (i), 481.080 (k), and 481.0771 (c).

A. General Information							
Business Name							
Physical Address							
City		County	State	ZIP			
Mailing Address							
City		County	State	ZIP			
Phone		Permit Number		Date			
Check On	e: O Theft	O Loss O Suspicio	ous Order O Discrepa	ncy			
B. Theft / Loss or Discrepancy							
O Yes O No							
Name of Police Agency							
Address of Police Agency							
Type of theft/loss/discrepancy (night break-in, armed robbery, employee theft, customer pilferage, incorrect amount received, etc.).							
List identifying marks, symbols, or prices codes on lost or stolen items.							
Describe security measures in place to prevent future thefts.							
C. Suspicious Order (Ephedrine, Pseudoephedrine, Norpseudoephedrine)							
Name of Business placing order							
Name of person (if known)							
Address							
Permit Number							
O Yes O No	New Account?		Date of Order				



PRECURSOR CHEMICAL LABORATORY APPARATUS

List the items ordered below or attach invoice. LIST OF PRECURSOR CHEMICALS/LABORATORY APPARATUS LOST/STOLEN/MISSING/SUSPICIOUS							
							Chemical
	+						
	+						
For suspicious orders please explain any unusual circumstances associate with this order.							
<u></u>							
I certify that the foregoing i	information is correct to the best	of my knowledge and belief.					
Signature							
Printed Name							
Date Signed							

Mailing Address:

Texas Department of Public Safety Precursor Chemical Laboratory Apparatus – MSC-0438 PO Box 4087 Austin, TX 78773-0542

To upload your form, please visit RSD secured website: https://www.dps.texas.gov/rsd/contact/default.aspx